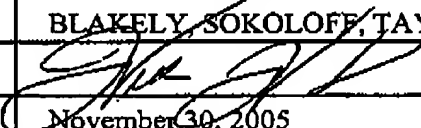


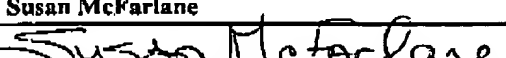


P.2  
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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application No.	09/676,381
		Filing Date	September 29, 2000
		First Named Inventor	Rezaur Rahman
		Art Unit	2611
		Examiner Name	Kieu Oanh T. Bui
Total Number of Pages in This Submission	26	Attorney Docket Number	42390P8797

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 60px; margin-top: 10px;"></div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	William W. Schaal, Reg. No. 39,018 <b>BLAKELY, SOKOLOFF, TAYLOR &amp; ZAFMAN LLP</b>
Signature	
Date	November 30, 2005

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Susan McFarlane		
Signature		Date	November 30, 2005

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wlr) 06/04/2004  
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

**FEE TRANSMITTAL  
for FY 2005**

Patent fees are subject to annual revision.

Complete if Known

Application Number	09/676,381
Filing Date	September 29, 2000
First Named Inventor	Rezaur Rahman
Examiner Name	Kieu Oanh T. Bui
Art Unit	2611
Attorney Docket No.	42390P8797

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

0.00

**METHOD OF PAYMENT (check all that apply)**☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify):☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.☐ Credit any overpayments**FEE CALCULATION****1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
15	20	0	\$0.00
Independent Claims	3	0	\$0.00
Multiple Dependent			

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description
1202	2202	50	25	Claims in excess of 20
1201	2201	200	100	Independent claims in excess of 3
1203	2203	300	180	Multiple Dependent claim, if not paid
1204	2204	300	150	**Reissue independent claims over original patent
1205	2205	300	150	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (1)

(\$)

0.00

\*or number previously paid, if greater. For Reissues, see below

**2. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description
1051	2051	130	65	Surcharge - late filing fee or oath
1052	2052	50	25	Surcharge - late provisional filing fee or cover sheet
2053	2053	130	130	Non-English specification
1251	2251	120	60	Extension for reply within first month
1252	2252	400	225	Extension for reply within second month
1253	2253	1,020	610	Extension for reply within third month
1254	2254	1,500	795	Extension for reply within fourth month
1255	2255	2,160	1,080	Extension for reply within fifth month
1401	2401	500	250	Notice of Appeal
1402	2402	500	250	Filing a brief in support of an appeal
1403	2403	1,000	500	Request for oral hearing
1451	2451	1,510	1,610	Petition to institute a public use proceeding
1460	2460	130	120	Petitions to the Commissioner
1807	1807	50	50	Processing fee under 37 CFR 1.17(q)
1808	1808	180	180	Submission of Information Disclosure Stmt
1809	1809	790	385	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	2810	790	395	For each additional invention to be examined (37 CFR § 1.129(u))

Other fee (specify)

SUBTOTAL (2)

(\$)

Fee Paid

**SUBMITTED BY**

Complete (if applicable)

Name (Print/Type)	William W. Schaal	Registration No. (Attorney/Agent)	39,018	Telephone	(714) 557-3800
Signature		Date	11/30/05		

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 12/15/2004.  
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

NOV 30 2005

<b>FEE TRANSMITTAL for FY 2005</b> <i>Potential fees are subject to annual revision.</i>		<b>Complete If Known</b>	
		Application Number	09/676,381
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	September 29, 2000
		First Named Inventor	Rezaur Rahman
<b>TOTAL AMOUNT OF PAYMENT</b> (\$) 0.00		Examiner Name	Kieu Oanh T. Bui
		Art Unit	2611
		Attorney Docket No.	42390P8797

**METHOD OF PAYMENT** (check all that apply)

☐ Check 
 ☐ Credit card 
 ☐ Money Order 
 ☐ None 
 ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below 
 ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. 
 ☐ Credit any overpayments

**FEE CALCULATION****1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
15	20*	0	\$0.00
Independent Claims	3	0	\$0.00
Multiple Dependent			

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 50	2202 25	Claims in excess of 20
1201 200	2201 100	Independent claims in excess of 3
1203 360	2203 100	Multiple Dependent claims, if not paid
1204 300	2204 150	**Reissue independent claims over original patent
1205 300	2205 150	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (1) (\$) 0.00


\*For number previously paid, if greater. For Reissues, see below

**2. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
2053 130	2053 130	Non-English specification	
1251 120	2251 60	Extension for reply within first month	
1252 450	2252 225	Extension for reply within second month	
1253 1,020	2253 510	Extension for reply within third month	
1254 1,590	2254 795	Extension for reply within fourth month	
1255 2,160	2255 1,080	Extension for reply within fifth month	
1401 500	2401 250	Notice of Appeal	
1402 500	2402 250	Filing a brief in support of an appeal	
1403 1,000	2403 500	Request for oral hearing	
1451 1,510	2451 1,510	Petition to institute a public use proceeding	
1460 130	2460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(a)	
1808 180	1808 180	Submission of Information Disclosure Sheet	
1809 700	1809 395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810 700	2810 395	For each additional invention to be examined (37 CFR § 1.129(b))	

Other fee (specify): \_\_\_\_\_

SUBTOTAL (2) (\$) \_\_\_\_\_

<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>	
Name (Print/Type)	William W. Schaal	Registration No. (Attorney/Agent)	39,018
Signature		Telephone	(714) 557-3800
		Date	11/30/05

Based on PTO/SB/17 (12-94) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 12/16/2004  
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Appl. No. 09/676,381  
Amdt. Dated 11/30/2005  
Reply to Office Action of August 31, 2005

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application. No.	:	09/676,381	Confirmation No. 1947
Applicant	:	Rezaur Rahman	
Filed	:	09/29/2000	
TC/A.U.	:	2611	
Examiner	:	Kieu Qanh T. Bui	
Docket No.	:	042390P8797	
Customer No.	:	8791	

Commissioner for Patents  
PO Box 1450  
Alexandria VA 22313-1450

**AMENDMENT**

Sir:

In response to the Office Action of August 31, 2005, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims, which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 5 of this paper.